

DOCUMENT RESUME

ED 290 069

CG 020 432

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TITLE Identity Management: Social Control of Identity by Children of Gay Fathers When They Know Their Father Is a Homosexual.
PUB DATE Aug 87
NOTE 18p.; Paper presented at the Annual Convention of the American Psychological Association (95th, New York, NY, August 28-September 1, 1987).
PUB TYPE Reports - Research/Technical (143) -- Speeches/Conference Papers (150)
EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Adolescents; *Coping; *Fathers; *Homosexuality; *Individual Power; Interpersonal Relationship; Nurses; *Parent Child Relationship; Self Concept; *Social Control; Young Adults

ABSTRACT

A study was conducted to examine how children cope with having a homosexual father so that helping professionals, and particularly nurses, might have a knowledge base upon which to base interventions. Data were obtained from indepth interviews with 19 individuals ranging in age from 14 to 35 who had a homosexual father. Two of the six male respondents identified themselves as also being homosexual. Results of the unstructured interviews indicated that the overriding task of these children was identity management through social control, i.e., management of their own identity through the use of social control mechanisms. It appeared that the children developed and used controlling strategies which controlled their interactions with their father, their father's interactions with them, or their interactions with others in relation to their father. Strategies identified include boundary control, non-disclosure, and disclosure. Various influencing factors appeared to help determine the degree or extent to which strategies were used. Influencing factors identified include the perceptual factors of mutuality and obtrusiveness, living arrangements, and developmental or age-related factors. Seven propositions based on these findings are presented, and implications for nurses are discussed (NB)

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IDENTITY MANAGEMENT: SOCIAL CONTROL OF IDENTITY BY CHILDREN
OF GAY FATHERS WHEN THEY KNOW THEIR FATHER IS A HOMOSEXUAL

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The purpose of this research was to discover how children cope with having a gay father so that assisting professionals such as nurses might have a knowledge base upon which to base interventions. My interest in this subject stems from my previous research on gay fathers (Bozett, 1981a,b). In that study the fathers I interviewed indicated that most of their children were accepting of them as gay, and were generally willing to participate with them singly or with their gay friends or lovers in gay social settings, such as, gay bars or restaurants. Although I believed these men, I had a hunch that it wasn't as easy for the children as they indicated it was. Also, a literature search revealed only one research study, and that was a study of gay fathers that also included interviews of 14 of their children. Findings indicated that the children were generally accepting of their fathers as gay, one son and one daughter were also gay, and several of the children had had problems of sexual acting out. All of the other research on the subject has been on the children of lesbian mothers or on transsexuals and, with the exception of one study, focused solely on the development of the children's sexual orientation. Findings from this research indicated that these children "...do not differ appreciably from children raised in more conventional family settings..." (Green, 1978, p.

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Presented at the 95th convention of the American Psychological Association, New York City, August, 1987.

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696-697). The one exception was a study by interview of 21 children ages 9 to 26 whose mothers were lesbian. All of the children had been in some form of therapy. Findings indicated that these children had concern over their own sexuality, they had a need to keep their mother's homosexuality secret, they felt isolated, they had problems with the mother's lover, yet they accepted their mother and had feelings of pride for her standing up for what she believed and for her challenging society's rules (Lewis, 1980). So, the impetus for my conducting the study was because it was a neglected area of research, was needed, and was one in which my curiosity had been piqued.

The Study

Method

The data for the study were obtained from depth interviews with 19 children. The interviews were audio-recorded, transcribed, and analyzed. The unstructured interview was used in order to gain insight into what the lives of these children were like in relation to having a father who was gay. The research approach used was that of field study directed toward generating grounded substantive theory according to the method of Glaser and Strauss (1967). This method generates theoretical constructs which explain the action in the social context under study by means of constant comparative analysis which is an inductive, qualitative, hypothesis-seeking strategy concerned with generating and plausibly suggesting (but not testing) many properties and hypotheses about a general phenomenon. Validity was addressed in two ways. First, as the interviews progressed themes began to emerge and as they did they were pursued in subsequent interviews for verification, clarification, and further refinement. Some which I thought might be of substance were not supported whereas others of

course were. Second, my interviews and findings were reviewed and discussed with two nurse researcher colleagues who provided verification of my theoretical scheme.

One other characteristic of this method is that the problem the researcher initially identifies for study often changes during the study. The reason for this is that initially there is insufficient data known about the subject matter to know exactly the right question to ask. This was true in my study. My original problem statement dealt with identifying coping strategies the children used when they knew their father was homosexual. Although I wasn't totally off the mark, the finalized problem statement is concerned with what identity management strategies these children use and what factors influence their use.

Demographic Data

There were 13 females and 6 males representing 14 gay fathers. Children's ages ranged from 14 to 35. Two of the five males identified themselves as gay whereas all of the females reported they were heterosexual. Four of the females were married and had from 1 to 3 children. Two others without children were divorced, and the remaining seven had never been married, although one had an infant son. Seven subjects were in secondary school or college and the remainder worked in occupations varying from mental health aide to restaurant manager and teacher. One male subject was in the military. Education ranged from being in the eighth grade through holding the masters degree. The three major religions were represented. The living arrangements of the children varied. Several teenage and adult children lived with their fathers whereas others lived with their mothers. Two married respondents' husbands were out of the country on business: One lived with her three children, and the other lived

with her infant daughter and mother. Other subjects either lived alone, with their children, or with roommates. One gay informant lived with his male lover. All except three of the children had siblings. Ten subjects lived in the environs of Oklahoma City, eight lived in the San Francisco Bay Area, and one lived in Iowa City, Iowa. One child was adopted; all others were biological. The subjects were recruited through gay fathers I know, and through advertisements in local gay, university, and commercial newspapers.

Related Theories

First it is important to stress that in this study the fathers identity as father is not at issue. In none of the interviews did the children express any difficulty at all with their father in the role of father; rather concerns were centered solely in relation to his gay identity.

My findings indicate that the overriding task of these children is identity management through social control; that is, management of their own identity through the use of social control mechanisms. To be specific, the child develops and uses controlling strategies which control the child's interactions with the father, or the father's interactions with the child, or the child's interactions with others in relation to the father. There are also influencing factors which help determine the degree or extent to which strategies are used, and are as important as the strategies themselves.

Why it is necessary for these children to utilize identity management strategies can be answered from several extent theoretical perspectives. One is social reaction theory (Weinberg & Williams, 1974) which posits that the more prejudicial a society is toward a given group the more adjustment difficulty individual group members have. Relating social reaction theory

to homosexuality Williams and Weinberg (1974) question the "...invariable importance..." (p. 381) of general societal reaction. They suggest that more important is how the person adapts to it. Providing further refinement of this idea Ross (1979) proposes that it is not actual societal reaction that is critical, but rather one's perception of societal reaction. His research on married gay men supported this notion - that perceived societal reaction in large measure determines the way an individual reacts to social pressure.

Attribution theory, which is concerned with what the average individual imputes the causes of behavior to be, asserts that behaviors or actions are accounted for by personal properties of the individual (Guiot, 1977). In addition, society categorizes individuals with a complement of attributes which are considered ordinary or natural for members of various categories (also see Goffman, 1959). Identity then is constructed in the mind of the other through behaviors observed in particular social circumstances which gives the observer information from which the observer imputes certain attributes. Attributions of identity are also determined by role expectations and the personal qualities expected in that role. When other's behaviors are congruent with one's expectations of the role, then understanding of the other is "accurate". However, there may be a dichotomy between putative role expectations (role prescriptions) and personal attributes in actual role enactment. In this instance the other has little or no basis for imputing attitudes or understanding the behavior of the other. In addition, personal qualities and behaviors are expected of persons in certain roles which help constitute identity formation. Therefore, when one assumes a position or role (like father) particular attributes will automatically be attributed to him. The "out of role" (Guiot, 1977, p. 695) behavior the children attribute to their father being

gay is inconsistent with normative expectations of the father role. Hence, these children use identity management strategies to reduce the evidence of the father's discreditable identity (Goffman, 1963).

Lastly, is Goffman's conceptualization of stigma (1963) in which he divides stigmatized individuals into the discredited in which the difference is evident, and the discreditable where the difference is not externally evident and is therefore not necessarily known about by those present. Gays, of course, are members of the latter category.

Even though social reaction theory and the concept of stigma have been intended to be applied to the actual members of groups thought to have diminished social desirability, they are also directly applicable to persons who are not members of the group, such as the children of gay fathers. There are several explanations which account for this. One of these is that..."selves exist only in a social environment (from) which they cannot be separated... Therefore "self" implies others" (Lindesmith, Strauss, & Denzin, 1977, p. 322). In addition, Goffman (1963, p. 47) comments about the informing nature of the "with" relationship stating that to be "with" someone is often used as a source of information concerning one's own social identity, "...the assumption being that (one) is what others are" (p. 47). Simply because an individual "...is related through the social structure to a stigmatized individual...the wider society may treat both individuals in some respects as one. Thus, (they) are ...obligated to share some of the discredit of the stigmatized person to whom they are related" (p. 30). Hence, an analysis of how the children of gay fathers manage the information they convey about themselves has to consider how they deal with the contingencies of being "seen with" their father. The children of gay fathers then respond to society's reaction to their father, to society's

reaction to themselves as the child of a gay father, or to both on the basis of their imputed or "virtual social identity," that is the negative identity society attributes to gays, rather than on their "actual social identity" (Goffman, 1963, p. 2).

While these theoretical and conceptual notions help understand why these children utilize identity management strategies they do not explain how - that is the process of using the strategies, and the conditions which influence their use. Hence, the need for additional theorizing (Knafl & Howard, 1984).

Findings

Social Control Strategies

Social control strategies are behaviors children employ vis-a-vis their gay father in order to project their selves (most particularly their sexual identity) so that they are perceived by others as they want to be perceived. There is no change in their self-concept; rather the dimension of their concern is change in others' perceptions of them if others were to discover that their fathers are gay. Thus, there is a conscious control of themselves and others vis-a-vis the father in order to protect themselves from identity contamination. The strategies are controlling in that they control behavior of the father, the self, or others. Each of these strategies with examples will be briefly described. Following will be a discussion of influencing factors which help determine the extent to which the children utilize the strategies described.

The first, and I think most significant, strategy is that of boundary control (Higgins & Bulter, 1982). Boundary control has three stems. First is controlling the boundary of the father's overt behavior (behavioral or verbal) which controls the expression of his homosexuality. For example,

one subject did not allow her father to bring his lover to her Christmas party although the father was welcome to come alone. The second stem of boundary control is controlling one's own behavior in relation to the father. For instance one respondent who formerly would attend concerts and eat out with her father will no longer be seen in public with him, since finding out that he is gay. Another child said, "I didn't invite my dad to my open house because I didn't want to introduce him to people I don't know well 'cause I didn't want people talking about me behind my back or pointing at me going 'Oh, her dad's a fag' ...I don't want the shame of it." A third stem is controlling others vis-a-vis the father. For example, the child who does not bring friends home in order to avoid encountering the father or the father's gay friends. The use of boundary control functions to keep the boundary of the father's expression of his homosexuality within the limits set by the child. By controlling the father, the self, or others in relation to the father, the child controls other's perceptions of himself.

The second strategy children use is to tell few if any others. This strategy is referred to as non-disclosure. For example, one young respondent said "I don't tell anyone else because I'm afraid they won't like me...(I'm) afraid they'll think I'm gay." The 15 year old boy whose both parents are gay had it all planned out that when he has a fiance', that he will tell her his parents are gay the night he proposes, fearing that if he tells her before, she might totally reject him. Non-disclosure may also take the form of deception such as referring to the father's lover as a housemate or uncle. Hiding gay artifacts such as newspapers when friends visit is another means of non-disclosure (Bozett, 1980). The function of not telling others is to control others' perception of the self as non-gay. It keeps one's identity from becoming contaminated. It prevents

embarrassment and keeps the child from becoming a social pariah, and this applies to adult children as well as to younger ones.

Another controlling strategy is just the opposite; disclosure. The most common reason for disclosing is that children believe that others are unaccepting of homosexuality or will be derogatory about them (the child) and thus others need to be "prepared" before meeting the father. One subject said that it was important to choose who to tell very carefully because "...you have to be sure you can trust them; that they won't...tell somebody else. I was worried people knowing (because) I was afraid of what they'd think of me; maybe it would be embarrassing." A son who himself is gay does disclose his father's gay identity to close friends because "...I talk about my family a lot and that's just one part of my family. It's significant."

Influencing Factors

Equally as important to understanding how these children cope with managing their father's identity variance are four influencing factors that determine the extent and degree they utilize the strategies just described.

The first two of these factors are categorized as perceptual. First is mutuality which refers to whether or not the child identifies with the father in some way. My findings indicate that when the child feels that he, too, is different or varies from societal norms in terms of behavior, lifestyle, values, or beliefs, or that there is some other mutual link with the father, the more accepting he is of his father as gay and the less he uses social control strategies. On the other hand, the more traditional or conforming children are, the more rejecting of their father as gay they tend to be, and the more they use social control strategies. Furthermore, the

father's homosexuality may tend to help legitimate the child's own feelings of variance - there is somehow a shared definition of what is an acceptable self. For example, one subject stated "...it was drinking that linked us together; we both had a drinking problem." Another respondent who was overweight stated "there's a lot of hostility...towards heavy people, too. I don't like being labeled and I understand what labeling is like; I think it's a little bit easier for me to accept a difference in someone else." Too, gay sons may feel a commonality with their father.

The second perceptual influencing factor is obtrusiveness or discernability of the father's homosexuality. Obtrusiveness refers to the child's perception of the father's overt manifestation of his homosexuality. What constitutes overt manifestation depends upon each child but it centers about the stereotypical symbols and behavior of gays such as the wearing of tight jeans or excessive jewelry. It also refers to the father's arranging for his children to participate with him in his gay world, or his desires for them to do so such as asking them to go to a gay restaurant. Any external manifestation that "...increases the difficulty of maintaining easeful inattention regarding the stigma" (Goffman, 1963, p. 103) may be considered by the child to be obtrusive. One daughter reported that "I don't invite him to any activities I think we might...enjoy together 'cause I'm always afraid that we'll run into someone that I know (since) it is fairly obvious that he is gay." Another son walks about 20 feet behind his dad when his father is walking arm in arm with another man. A 14 year old subject reported that his father had visited school several times with "...all his jewelry on. It was obvious. They started calling me names like homoson. It was awful. I couldn't stand it. I hate him for it. I really

do" (Bozett, 1980). One young son stated "...I feel at ease when I'm in public with my dad...my dad does not act homosexual. He does not. Walt (his father's lover) does not act like that."

The third influencing factor is situational and refers specifically to living arrangements. Its significance lies in the fact that the child's living arrangements often dictate the controlling strategies used. For example, if the child lives with his father who has a lover he may seldom bring friends home, whereas if the child lives independently he has total control over interactions in his own household.

The last influencing factor is maturational and relates to the age of the child. The older the child is, especially if he is old enough to live independently, the greater control over himself and others he has vis-a-vis interactions with his father, whereas younger more dependent children have less control. One's maturational level, then, is a significant determinant of which control strategies are used and the extent of their use.

I know I may have made it sound as though gay fathers intend for their homosexuality to be evident, but this is not the case. Most of these men are sensitive and often go to great lengths to keep the fact of their homosexuality from public attention in order to prevent difficulties from arising for their children.

Hypothetical Propositions

On the basis of these findings several propositions can be stated.

1. The more negative children perceive societal reaction to homosexuality to be, the greater they assume society will react negatively toward them (the children) on the basis of their imputed or virtual rather than actual social identity. (Social reaction theory)

2. Children's acceptance of their father as gay is directly related to their perceptions of society's attitudes toward homosexuality; the more they perceive society to be homonegative, the less accepting children will be of their father as gay. (Ross' modification of social reaction theory)
3. The greater the feeling of mutuality the child has with his father, the fewer social control strategies the child will use, and there will be fewer social situations in which they will be employed. (Perceptual influencing factor)
4. The more obtrusive the child believes the father's homosexuality to be, the more social control strategies the child will use, and there will be more social situations in which they will be employed. (Perceptual influencing factor)
5. The child's age will influence the principle social control strategies employed. (Maturational factor)
6. The child's living arrangements will influence the principle social control strategies employed. (Situational factor)
7. The degree and extent of interaction of the perceptual, situational, and maturational influencing factors determine the extent and degree of the use of social control strategies. (Interaction effect of influencing factors)

Implications

Nurses who are most likely to encounter these children are psychiatric-mental health practitioners, school nurses, and community and pediatric nurses. To be of assistance the nurse should have a sound knowledge base regarding homosexuality and gay lifestyles so that actions are not based on

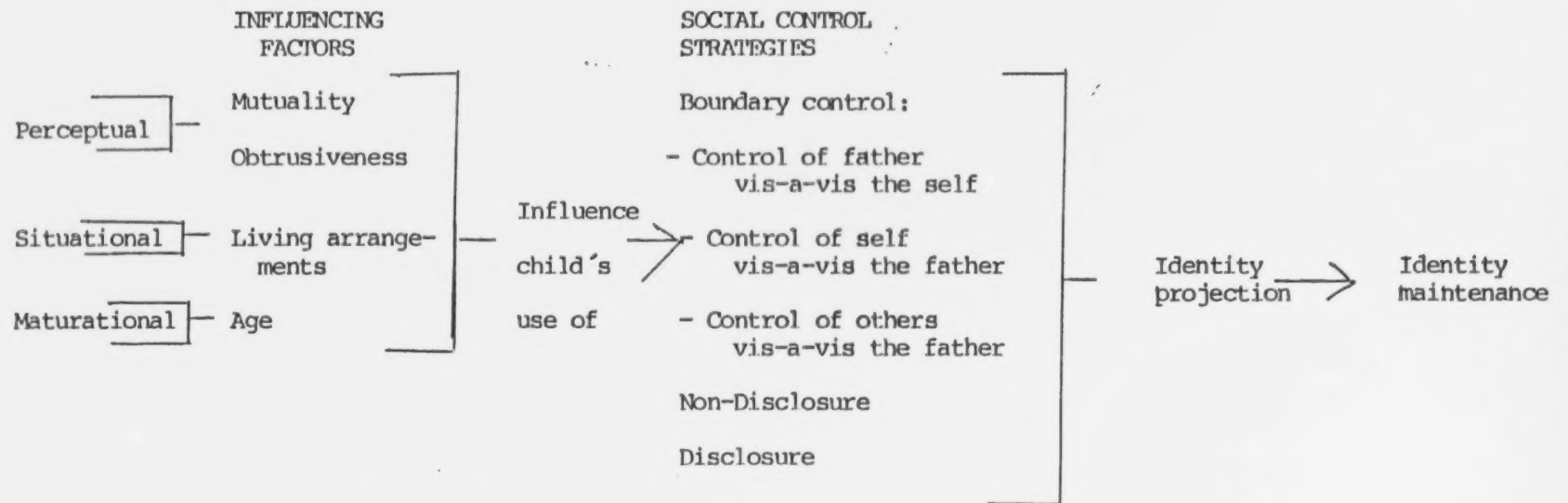
the many myths which surround it. Also, homophobic nurses or ones who are prejudiced toward gays as parents should refer the child to a nurse who does not hold these points of view.

Data collection should focus on the presenting problem and not on the gay relationship in the household unless they are clearly relevant. These children may need to be helped to recognize that much of their stress may not be related to their fathers' gay identity so much as it is to society's reactions toward it. Thus, they may need help recognizing that although they have no control over society's viewpoint they do have power to control their own lives in relation to their father. How to exercise this power may be a major focus of interventions. Nurses may also be of assistance to the fathers of these children to help them understand their children's concerns and to assist them to be sensitive to their special needs.

Conclusion

According to Glaser and Strauss (1967) a given piece of research is brought to a close when the conceptual framework forms a systematic theory, and when it states the subject studied in reasonably accurate form, a form that others can use in studying the same or a similar area. I believe that this theoretical scheme explains most of the behavior of the children of gay fathers in social interaction with their fathers, and I believe it has the power of predicting as well. That of course remains to be determined by further research.

CHILDREN OF GAY FATHERS: SOCIAL CONTROL OF IDENTITY



INFLUENCING FACTORS AND SOCIAL CONTROL STRATEGIES
UTILIZED BY THE CHILDREN OF GAY FATHERS TO ACHIEVE
MAINTENANCE OF IDENTITY

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